

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Fresenius Medical Care North America PAC

ADDRESS (number and street) ▼

801 Pennsylvania Avenue, NW

Suite 255

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00401299

3. IS THIS REPORT ☐ NEW (N) OR ☒ AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)

(b) Monthly Report Due On: ☐ Feb 20 (M2) ☒ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
PRE-Election Report for the: ☐ Convention (12C) ☐ Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)
POST-Election Report for the:

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y
04 01 2015 04 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Eric Bishop

Signature of Treasurer

Eric Bishop

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 21 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 04 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 04 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		93762.04
(b) Cash on Hand at Beginning of Reporting Period.....	35061.27	
(c) Total Receipts (from Line 19)	8217.70	45034.23
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	43278.97	138796.27
7. Total Disbursements (from Line 31)	4667.45	100184.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38611.52	38611.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

5301.18

26690.52

(ii) Unitemized

2916.52

17991.53

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

8217.70

44682.05

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

8217.70

44682.05

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

352.18

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

8217.70

45034.23

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

8217.70

45034.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	167.45	684.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	167.45	684.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	99500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4667.45	100184.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4667.45	100184.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8217.70	44682.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8217.70	44682.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	167.45	684.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	352.18
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	167.45	332.57

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Amendment to correct inaccurate Line 15 and Line 17 totals.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 22

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Patrick McCarthy

Mailing Address 82 Belcher Dr

City State Zip Code
 Sudbury MA 01776-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

04 / 30 / 2015

Transaction ID : AD0F6772C458542F29DC

Amount of Each Receipt this Period

240.00

Payroll Deduction: \$240.00/

Full Name (Last, First, Middle Initial)

B. Joseph Winslow

Mailing Address 920 Winter St

City State Zip Code
 Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Quality Systems & Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

04 / 30 / 2015

Transaction ID : AC69F258F44A54760955

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$80.00/

Full Name (Last, First, Middle Initial)

C. Peter Sauer

Mailing Address 920 Winter St

City State Zip Code
 Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President - Fresenius Health Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

04 / 30 / 2015

Transaction ID : AE721A9B8168E4491B68

Amount of Each Receipt this Period

110.00

Payroll Deduction: \$110.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

430.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 22
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey HymesMailing Address 750 Old Hickory Blvd
Ste 230

City	State	Zip Code
Brentwood	TN	37027-4528

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A7E8D5746478E4CA8A33

Amount of Each Receipt this Period

200.00

Payroll Deduction: \$200.00/

Full Name (Last, First, Middle Initial)

B. Carol A Ernst

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A0EABB8A3F7B44AB0B8F

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Nancy Diane Carter

Mailing Address 1607 Revella Arch

City	State	Zip Code
Chesapeake	VA	23322-6991

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Physician Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A968A1BEC959840098AB

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

SUBTOTAL of Receipts This Page (optional)..... ►

326.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Robert Sepucha

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

Transaction ID : ABE3003A5C0F24EEB852

Amount of Each Receipt this Period

384.62

Payroll Deduction: \$384.62/

Full Name (Last, First, Middle Initial)

B. Paul ZabetakisMailing Address 1875 I St NW
FI 12

City

Washington

State

DC

Zip Code

20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President, RRI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

Transaction ID : A813E8A36CD1A48B4A05

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. William Fink

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02421-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP, ITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

Transaction ID : A53ACE3E6911D4523A2B

Amount of Each Receipt this Period

100.00

Payroll Deduction: \$100.00/

SUBTOTAL of Receipts This Page (optional)..... ▶

561.54

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Steven P Covino

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : AE01411C7E2814E5C830

Amount of Each Receipt this Period

96.16

Payroll Deduction: \$96.16/

Full Name (Last, First, Middle Initial)

B. Catherine Dubinsky

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Operations Integrity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A54D97B325A7B4F289AA

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Michelle Cowens

Mailing Address 516 Goldenwest St

City

Huntington Beach

State

CA

Zip Code

92648-2639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President, Physician Practice Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A3A9E9BD46C6D447D853

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Donald N CantalupoMailing Address 100 Paterson Plank Rd
Apt 313

City	State	Zip Code
Jersey City	NJ	07307-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RSM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A71853D198CAF4BCF90F

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

B. Richard Van Zandt

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President - Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : AE080F7059E4343009C4

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Liam WalshMailing Address 1875 I St NW
FI 12

City	State	Zip Code
Washington	DC	20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A450E5F2D25B34EDEB86

Amount of Each Receipt this Period

134.00

Payroll Deduction: \$134.00/

SUBTOTAL of Receipts This Page (optional)..... ▶

260.92

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Douglas G. Kott

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	5		

Transaction ID : A4D53468FF4364866AC4

Amount of Each Receipt this Period

384.60

Payroll Deduction: \$384.60/

Full Name (Last, First, Middle Initial)

B. Stephanie DeFranco

Mailing Address 525 Sycamore Dr

City

Milpitas

State

CA

Zip Code

95035-7429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, New Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	5		

Transaction ID : A03C7D30CF415433F8FC

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Jayanta RayMailing Address 5215 N O Connor Blvd
Ste 1100

City

Irving

State

TX

Zip Code

75039-3739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	5		

Transaction ID : AB0531ED39D634E0EA08

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

SUBTOTAL of Receipts This Page (optional)..... ►

511.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 22
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Matthew D Kinser

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Managed Care

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A72515B389A2146B9B24

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

B. Maria BurkeMailing Address 129 W Trade St
Ste 1050

City

Charlotte

State

NC

Zip Code

28202-5303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Strategic Planning

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A49E70927E4294E00AD8

Amount of Each Receipt this Period

60.00

Payroll Deduction: \$60.00/

Full Name (Last, First, Middle Initial)

C. Robert P. LoeperMailing Address 1875 I St NW
FI 12

City

Washington

State

DC

Zip Code

20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : AD84A3BB300F3403B9FD

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional)..... ►

213.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 22

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Terry L Ketchersid

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 30 / 2015

Transaction ID : AC32ECE96674D4EDCA9C

Amount of Each Receipt this Period

100.00

Payroll Deduction: \$100.00/

Full Name (Last, First, Middle Initial)

B. Brian Silva

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP, Human Resources & Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.79

Date of Receipt

04 / 30 / 2015

Transaction ID : ABE940B89654344668BF

Amount of Each Receipt this Period

384.62

Payroll Deduction: \$384.62/

Full Name (Last, First, Middle Initial)

C. Mignon Early

Mailing Address 124 Verdae Blvd

City

Greenville

State

SC

Zip Code

29607-3843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

04 / 30 / 2015

Transaction ID : A5E1389A9A87B46EC94D

Amount of Each Receipt this Period

60.00

Payroll Deduction: \$60.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

544.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. John Baldasaro

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02421-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP ITG Revenue Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A850941613ACA48D6A60

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

B. Kathleen Kawa

Mailing Address 90 Glacier Dr

City

Westwood

State

MA

Zip Code

02090-1818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Director of Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A9AEA2937D3114709BB2

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

C. William Perry

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A8E08908419E64CF2AC4

Amount of Each Receipt this Period

60.00

Payroll Deduction: \$60.00/

SUBTOTAL of Receipts This Page (optional)..... ►

160.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 22
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Allen MillsMailing Address 210 N Church St
Unit 2914

City	State	Zip Code
Charlotte	NC	28202-2387

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A421AA4EA4D5648E89C4

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

B. Lisa Dombro

Mailing Address 927 Prairie Ave

City	State	Zip Code
Park Ridge	IL	60068-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : AE32C302B4BC241DBB21

Amount of Each Receipt this Period

384.62

Payroll Deduction: \$384.62/

Full Name (Last, First, Middle Initial)

C. Joseph Ruma

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Development Acquisitions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : A431254C688154995A7A

Amount of Each Receipt this Period

60.00

Payroll Deduction: \$60.00/

SUBTOTAL of Receipts This Page (optional)..... ►

521.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 22

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Donna McCarthy

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Division President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1038.42

Date of Receipt

04 / 30 / 2015

Transaction ID : A41F165ABE90244F7A15

Amount of Each Receipt this Period

230.76

Payroll Deduction: \$230.76/

Full Name (Last, First, Middle Initial)

B. Anthony Hayes

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

04 / 30 / 2015

Transaction ID : A6B954CF98B0E4495814

Amount of Each Receipt this Period

62.00

Payroll Deduction: \$62.00/

Full Name (Last, First, Middle Initial)

C. Joseph H Johnston

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr VP of Biomedical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 30 / 2015

Transaction ID : A89B72CAE89C345E59D1

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

342.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. David Cariello

Mailing Address 2219 Hollywood Blvd, Suite 101

City State Zip Code
Hallandale FL 33009

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP of Real Estate & Construction Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A08FA6EC68EE34D62B51

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

B. Kim SonnenMailing Address 1875 I St NW
FI 12

City State Zip Code
Washington DC 20006-5409

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP Marketing & Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A48B6D62EDC6B4D1A8CA

Amount of Each Receipt this Period

260.00

Payroll Deduction: \$260.00/

Full Name (Last, First, Middle Initial)

C. Erma Hall

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A45FABB232273417CA96

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$76.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

412.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Sandra Geraci

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : ACC047E7DAAB94EBAA9

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$80.00/

Full Name (Last, First, Middle Initial)

B. Deborah Harvey

Mailing Address 100 Galleria Pkwy SE
Ste 500

City

Atlanta

State

GA

Zip Code

30339-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : AC42039CF1F2344A7865

Amount of Each Receipt this Period

300.00

Payroll Deduction: \$300.00/

Full Name (Last, First, Middle Initial)

C. Nicholas Brownlee

Mailing Address 1875 I St NW
FI 12

City

Washington

State

DC

Zip Code

20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President SRM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A0AAB3EC197434A919B4

Amount of Each Receipt this Period

384.60

Payroll Deduction: \$384.60/

SUBTOTAL of Receipts This Page (optional)..... ►

764.60

TOTAL This Period (last page this line number only)..... ►

5301.18

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Fresenius Medical Care North America PAC

Response	Percentage
U.S. should take more action to reduce global warming	167.45

State: District:

Category/
Type

State: District:

Category/
Type

State: District:

167.45

167.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Katherine Clark For Congress

Mailing Address PO Box 361

City	State	Zip Code
Malden	MA	02148

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Katherine M. ClarkOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

Transaction ID : B8D5B38345EEC45E5A6E

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Pat Meehan For Congress

Mailing Address 50 S Providence Road

City	State	Zip Code
Media	PA	19063

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Patrick L. Meehan Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2015

Transaction ID : BAC616C69941C4521A62

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Hatch Election Committee Inc

Mailing Address PO Box 3986

City	State	Zip Code
Washington	DC	20027

Purpose of Disbursement
Direct Contribution

Candidate Name

Sen. Orrin G. HatchOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : B4D45F4D527B94B3FA56

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Bluegrass Committee

Mailing Address 220 1/2 E Street, NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Other2015

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2015

Transaction ID : B1AAF1888211640CF834

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Bluegrass Committee

Mailing Address 220 1/2 E Street, NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Void - Bluegrass Committee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2015

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Other2015

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2015

Transaction ID : B20D26EECC20348E2807

Amount of Each Disbursement this Period

-5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

4500.00
